



MDCM COMMUNICATIONS  
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*HealthCore*

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*Henry Ford Continuing Care*

*Henry Ford Health Sciences Center*

*Henry Ford Hospital*

*Henry Ford Medical Group*

*Henry Ford Kingswood Hospital*

*Horizon Health System*

*Maplegrove Centers*

*Onika Insurance Company Limited*

*The Fund for Henry Ford Hospital*

*Henry Ford Wyandotte Hospital*

Norma Hagenow, Chair  
Certificate of Need Commission  
Health Facilities Section - Certificate of Need  
320 S. Walnut Street  
Lewis Cass Building  
Lansing, MI 48913

RE: CON Review Standards for Psychiatric Beds and Services

Dear Commissioner Hagenow,

I would encourage you and the Certificate of Need Commission to appoint a Standard Advisory Committee to review and revise the standards for Psychiatric Beds and Services.

It has been several years since these standards have been examined in any substantive fashion. As currently written, the standard offer little flexibility with respect to replacing beds or facilities. The replacement zone is limited to a two-mile radius, and replacement is further restricted to the planning area where the facility is located. This definition effectively cuts in half what is already a small replacement zone for facilities that are located very close to the edge of a planning area since a facility may not be replaced in an adjacent planning area.

In addition, it would be worthwhile to review the existing definition of the planning areas. Since the number of psychiatric units and/or hospitals is substantially less than the number of acute care facilities, psychiatry patients often travel for service into other planning areas. It would be worth looking at the origin of patients seeking service to ensure that the current planning area definitions are appropriate.

Another shortcoming of the existing standards is that there is no provision for the relocation of existing licensed beds to another facility. The Commission recognized the wisdom of such an option in the review standards for acute care hospital beds by allowing for the transfer of beds between facilities, provided there was no increase in the bed inventory. Such an approach would be appropriate for psychiatry beds and would encourage providers to work together to establish psychiatric units that are appropriately sized to be efficient and to meet demand for service.

Thank you for the opportunity to make these comments. I hope that you will agree that the standards for psychiatric beds could benefit from a review by a Standard Advisory Committee and that you will take the opportunity to appoint one at the next Commission meeting.

Yours Sincerely

Elizabeth C. Palazzolo  
Director, Planning & Research